

**IN THE UNITED STATES DISTRICT COURT  
FOR THE EASTERN DISTRICT OF VIRGINIA  
Alexandria Division**

STUART L. SKINNER, JR., EXECUTOR OF THE  
ESTATE OF STUART LEWIS SKINNER, DECEASED  
8439 Willow Glen Court  
Manassas, VA 20110

Plaintiff

v.

Case No. \_\_\_\_\_

UNITED STATES OF AMERICA

Serve:

G. Zachary Terwilliger, Esq.  
United States Attorney for the Eastern District of Virginia  
Justin W. Williams United States Attorney's Building  
2100 Jamieson Avenue  
Alexandria, VA 22314

and

Serve:

William Barr, Esq.  
Attorney General of the United States of America  
U.S. Department of Justice  
950 Pennsylvania Ave. NW  
Washington, DC 20530-0001

Defendant

**COMPLAINT**

COMES NOW, plaintiff STUART L. SKINNER, JR., Executor of the Estate of Stuart Lewis Skinner, by and through his attorneys, TRIALHAWK LITIGATION GROUP, LLC, and seeks judgment against the United States of America in the amount and on the basis set forth herein. In support whereof, plaintiff alleges as follows:

**PARTIES & JURISDICTION**

1. This action is brought against the United States of America pursuant to the Federal Tort Claims Act, 28 U.S.C. § 1346(b), 2671-2680.

2. Venue for this action is appropriately in this District and Division pursuant to 28 U.S.C. § 1402, as the plaintiff resides within the Eastern District of Virginia and many of the acts complained of occurred at Fort Belvoir Community Based Outpatient Clinic (“Fort Belvoir CBOC”), in Fort Belvoir, Virginia.

3. The acts of negligence complained of occurred in Virginia and Washington, D.C., and therefore, the Virginia and/or Washington, DC laws on damages apply.

4. At all times relevant hereto, decedent Stuart Lewis Skinner (“Mr. Skinner”) was a competent adult resident of the Commonwealth of Virginia, living at 8439 Willow Glen Court, Manassas, VA 20110.

5. At all times relevant hereto, plaintiff Stuart L. Skinner, Jr. (“plaintiff”) was a competent adult resident of the Commonwealth of Virginia, also living at 8439 Willow Glen Court, Manassas, VA 20110.

6. Plaintiff is the Executor of the Estate of Stuart Lewis Skinner, having been qualified by the Clerk of the Prince William County Circuit Court on April 18, 2018.

7. This action arises as a result of acts and omissions by employees and/or agents of the United States of America relating to medical services delivered to Mr. Skinner while a patient at the Fort Belvoir CBOC, located at 9300 DeWitt Loop, Fort Belvoir, VA 22060, and the Washington, DC VA Medical Center, located at 50 Irving St. NW, Washington, DC 20422.

8. At all times relevant hereto, the Fort Belvoir CBOC and Washington, DC VA Medical Center held themselves out as being medical facilities capable of providing medical care, preventive care, and health education for eligible veterans such as Mr. Skinner.

9. The medical care rendered to Mr. Skinner by the medical personnel at the Fort Belvoir CBOC and Washington, DC VA Medical Center was provided by employees and/or agents of the United States of America acting within the course and scope of their employment and/or agency.

10. A patient-healthcare provider relationship was established between Mr. Skinner and the medical personnel at the Fort Belvoir CBOC and Washington, DC VA Medical Center and that relationship continued at all times relevant to the acts alleged herein.

11. If the United States of America were a private person or corporation, it would be liable to plaintiff in accordance with the laws of the Commonwealth of Virginia and/or the District of Columbia.

12. Pursuant to 28 U.S.C. § 2675(a), the claim set forth herein was presented to the U.S. Department of Veterans Affairs on June 5, 2018. On December 5, 2018, the six months for final disposition of the claim by the U.S. Department of Veteran Affairs elapsed.

13. On April 8, 2019, the U.S. Department of Veterans Affairs issued a denial of the administrative tort claim presented herein.

14. All administrative remedies have thus been exhausted and plaintiff is filing suit within the six-month deadline of the final denial of the claim pursuant to 28 U.S.C. § 2675(a).



**FACTS**

15. In the years prior to his death, Mr. Skinner received his routine medical care at the Fort Belvoir CBOC and Washington, DC VA Medical Center.

16. On June 19, 2014, as part of routine testing, Mr. Skinner underwent a routine fecal occult blood test with negative results.

17. On July 12, 2016, Natasha Petrakis, M.D., the primary care physician for Mr. Skinner at Fort Belvoir CBOC, ordered a fecal immunochemical test ("FIT") occult blood testing kit with written instructions for routine colorectal cancer screening for Mr. Skinner.

18. Notwithstanding providing the FIT occult blood testing kit to Mr. Skinner, Dr. Petrakis set her next appointment with Mr. Skinner for a return visit six months later.

19. The results of the FIT occult blood test were released and returned as positive on July 20, 2016.

20. Dianna Stukes, P.A. at Fort Belvoir CBOC noted the positive FIT occult blood test results on July 21, 2016 and called Mr. Skinner to notify him of the positive result and recommend a follow-up colonoscopy.

21. Mr. Skinner was scheduled for and attended a pre-colonoscopy group clinic appointment on August 8, 2016 at the Washington, DC VA Medical Center. The indication for his colonoscopy was listed as an occult blood positive stool test.

22. On September 1, 2016, Mr. Skinner underwent a colonoscopy by resident Abdulhameed Al-Sabban, M.D. and attending Andrea E. Reid, M.D. at the Washington, DC VA Medical Center. The indication for the procedure was again listed as a positive FIT result.

23. The gastroenterologists did not document any impressions from the September 1, 2016 that would have explained the positive FIT result.

24. Dr. Petrackis was listed as Mr. Skinner's primary care physician and received a copy of the September 1, 2016 colonoscopy report authored by Dr. Al-Sabban and Dr. Reid.

25. On September 6, 2016, a report interpreting the pathology specimens obtained during the September 1, 2016 colonoscopy was signed by Edina Paal, M.D.

26. Dr. Paal did not note any pathologic findings or diagnoses in her report that would explain the positive FIT result.

27. Dr. Petrackis was listed as Mr. Skinner's primary care physician and received a copy of the September 6, 2016 pathology report authored by Dr. Paal, putting her on notice that neither the September 1, 2016 colonoscopy nor the pathology obtained during that procedure provided any explanation for why Mr. Skinner had a positive FIT result.

28. Mr. Skinner returned to Dr. Petrackis at the Fort Belvoir CBOC for his previously-scheduled six-month follow-up appointment on January 18, 2017.

29. Mr. Skinner's documented history as of January 18, 2017 included his positive fecal occult blood test result, but Dr. Petrackis did not note any further investigation or follow-up on that result or the negative colonoscopy that had ensued in her history, review of systems, assessment, or plan for the January 18, 2017 encounter.

30. On February 14, 2017, Mr. Skinner saw resident Brandon Anderson, M.D. and attending Anita Aggarwal, M.D. for a hematology consult at the Washington, DC VA Medical Center related to recent bloodwork results showing low red blood cells ("RBCs"), low hemoglobin that was declining from the year prior, and low hematocrit values.

31. On February 23, 2017, Dr. Petrackis entered a phone note in Mr. Skinner's medical records corresponding to her review of Mr. Skinner's recent laboratory studies.

32. Despite her knowledge of the downward trend in Mr. Skinner's hematocrit and hemoglobin, his negative colonoscopy results, and his positive FIT result, Dr. Petrackis offered no explanation for and initiated no new investigation into Mr. Skinner's symptoms and results as a result of her involvement on February 23, 2017.

33. On February 28, 2017, Mr. Skinner followed up in the hematology clinic at the Washington, DC VA Medical Center with medical student Ryan Young Rhie and attending Charles Hesdorffer, M.D.

34. By February 28, 2017, Mr. Skinner's bloodwork showed a drop of an additional two points in his hemoglobin values since his blood was last tested two weeks earlier.

35. Dr. Hesdorffer and the medical student deemed it unlikely that the ongoing drop in Mr. Skinner's hemoglobin values had a hemolytic etiology because he had no underlying hemolytic disorder or autoimmune disease.

36. Instead, Dr. Hesdorffer and the medical student believed it most likely that Mr. Skinner had an acute bleed and was at risk for a significant bleed due to his positive FIT result and downtrending hemoglobin and hematocrit.

37. Notwithstanding this belief, Dr. Hesdorffer and the medical student did not order any further tests to rule out or identify the potential source of the significant bleed, instead discontinuing Mr. Skinner's anticoagulation and starting him on iron supplements.

38. On April 25, 2017, Mr. Skinner again saw Dr. Hesdorffer at the hematology clinic at the Washington, DC VA Medical Center, but no further follow-up was scheduled thereafter.



39. On September 3, 2017, after presenting to Novant Health UVA Health System Prince William Medical Center with generalized weakness, black stools, abdominal pain, and thirty pounds of weight loss over the past several months, a CT of Mr. Skinner's abdomen and pelvis was ordered and showed metastatic liver disease.

40. On September 5, 2017, Mr. Skinner underwent an upper endoscopy, revealing a large friable mass at the gastroesophageal junction and involving the fundus of the stomach.

41. Biopsies obtained during the upper endoscopy and taken of Mr. Skinner's liver in a separate procedure confirmed that he had poorly differentiated adenocarcinoma—i.e., cancer.

42. On September 14, 2017, Mr. Skinner saw oncologist Geoffrey Moorer, M.D., who classified Mr. Skinner's cancer as Stage IV esophageal cancer with metastasis to the liver.

43. Mr. Skinner underwent two rounds of chemotherapy and palliative radiotherapy to the gastroesophageal junction and stomach in an effort to stop his ongoing bleeding problems.

44. Despite the belated treatment he received, Mr. Skinner succumbed to his esophageal cancer and its massive metastases to his liver, dying on December 17, 2017, just three months after he was first diagnosed with cancer.

45. As a result of the negligence of the United States of America and its healthcare provider employees and/or agents, Mr. Skinner's esophageal cancer was not timely diagnosed or treated, leading to its unimpeded growth and metastasis to his liver, his prolonged inconvenience, prolonged and extreme physical and emotional pain and suffering, and untimely death.

46. The United States of America was negligent in the care and treatment of Stuart Lewis Skinner through its employees and/or agents.

**COUNT 1 - WRONGFUL DEATH**

47. Plaintiff's allegations in paragraphs 1-44 are incorporated by reference herein.

48. The United States of America and its medical personnel at Fort Belvoir CBOC and the Washington, DC VA Medical Center had a duty to provide Stuart Lewis Skinner with the degree of care expected of reasonably prudent practitioners in their field of practice under the same or similar circumstances.

49. The United States of America and its medical personnel at Fort Belvoir CBOC and the Washington, DC VA Medical Center deviated from the standard of care and were guilty of negligence and medical malpractice in the following respects:

- a. failing to appreciate and properly treat the evolving physical condition of Mr. Skinner;
- b. failing to appreciate the significance of Mr. Skinner's positive FIT result;
- c. failing to consider alternative causes of Mr. Skinner's positive FIT result;
- d. failing to appropriately interpret and follow up on laboratory results and the findings of Mr. Skinner's colonoscopy demonstrating no explanation for his positive FIT result or declining hemoglobin and hematocrit values;
- e. failing to timely address the likelihood that Mr. Skinner had a significant bleed after hemolytic causes of his condition had been ruled out;
- f. failing to properly diagnose and treat Mr. Skinner's esophageal cancer and prevent metastasis of the same to his liver;



g. failing to recognize or respond to the deterioration in Mr. Skinner's condition prior to his diagnosis of esophageal cancer with massive liver metastases by outside healthcare providers; and

h. failing to prevent the untimely death of Mr. Skinner.

50. As a direct and proximate result of the negligence of the United States of America and its medical personnel at Fort Belvoir CBOC and the Washington, DC VA Medical Center, Stuart Lewis Skinner died on December 17, 2017, which would not have occurred but for the negligence of the United States of America and its medical personnel at Fort Belvoir CBOC and the Washington, DC VA Medical Center.

51. As a direct and proximate result of the negligence of the United States of America and its medical personnel at Fort Belvoir CBOC and the Washington, DC VA Medical Center, Mr. Skinner's estate has incurred expenses for his care and treatment incident to the injury resulting in his death, and also incurred funeral and burial expenses.

52. As a direct and proximate result of the negligence of the United States of America and its medical personnel at Fort Belvoir CBOC and the Washington, DC VA Medical Center, the statutory beneficiaries of Mr. Skinner's estate have suffered, and will continue to suffer in the future, sorrow, mental anguish, and loss of solace, society, companionship, comfort, guidance, kindly offices, and advice of Mr. Skinner.

53. As a direct and proximate result of the negligence of the United States of America and its medical personnel at Fort Belvoir CBOC and the Washington, DC VA Medical Center, the statutory beneficiaries of Mr. Skinner's estate have suffered, and will continue to suffer in the future, the loss of services, protection, care, and assistance provided by Mr. Skinner.

WHEREFORE, plaintiff moves for judgment against the United States of America in the amount of Five Million Dollars (\$5,000,000.00), plus pre-judgment and post-judgment interest and the costs of this action.

STUART L. SKINNER, JR.,  
EXECUTOR OF THE ESTATE OF  
STUART LEWIS SKINNER, DECEASED  
By counsel

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